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CONFIRMATION NO. 2430

SERIAL NUMBER 10/560,901	FILING or 371(c) DATE 12/16/2005 RULE	CLASS 606	GROUP ART UNIT 4134	ATTORNEY DOCKET NO. 27129U		
APPLICANTS Hamid Sharim, Kochav Yair, ISRAEL, <i>[Signature]</i>						
** CONTINUING DATA ***** This application is a 371 of PCT/IL04/00524 06/17/2004 <i>[Signature]</i> which claims benefit of 60/478,855 06/17/2003						
** FOREIGN APPLICATIONS ***** <i>[Signature]</i>						
** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY ** 09/03/2006						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <i>[Signature]</i> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY ISRAEL	SHEETS DRAWINGS 6	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 1
ADDRESS NATH & ASSOCIATES 112 South West Street Alexandria, VA 22314 UNITED STATES						
TITLE Orthopedic clamps						
FILING FEE RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		